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Summary

CHARACTERIZING LARGE COMMON BILE DUCT STONES: DEFINING SIZE AND CLINICAL IMPLICATIONS

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A retrospective study of 181 patients found that common bile duct stones larger than 12 mm predict ERCP treatment failure with 74% sensitivity and 73% specificity.

KEY POINTS

- ROC curve analysis identified 12 mm as the optimal threshold for predicting endoscopic treatment failure in common bile duct stones.
- Stones exceeding 12 mm were a significant predictor of routine endoscopic therapy failure in univariate analysis (p=0.001).
- The ratio of stone size to CBD diameter showed no significant association with ERCP failure (p=0.276).
- The study included 181 patients (mean age 64 years) who underwent ERCP between January 2019 and December 2022, with first-therapy efficacy of 61.5%.
- This material is relevant for gastroenterologists and endoscopists managing common bile duct stones and planning ERCP interventions.

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